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JUN 03 2005**FACSIMILE COVER SHEET****DATE:** June 3, 2005**TO:** Examiner Gary Jackson
TC Art Unit: 3731**Fax No.:** (703) 872 9306**FROM:** Thomas O. Hoover**No. of pages transmitted**
(including this page): 10**Our File:** BIH-002AX**Time:****Your Ref:****Sent by:** Jan

Application No.: 10/647,657

Filed Date: August 25, 2003

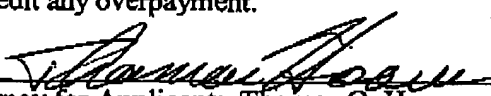
Confirmation No.: 2131

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MESSAGE**PLEASE DELIVER DIRECTLY TO:**
EXAMINER Gary Jackson, Tel. (571) 272-4697
TC ART UNIT NO: 3731**FOR ENTRY**

Enclosed for filing please find a:

Amendment Transmittal Sheet**Amendment**

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional filing fees associated with this communication or credit any overpayment.


Attorney for Applicant: Thomas O. Hoover
Registration No. 32,470

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PATENT

Rev 06/04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application : William Cohn, et al.
Application No. : 10/647,657
Filed : August 25, 2003
Confirmation No. : 2131
For : SUTURE SYSTEM
Examiner : Gary Jackson
Attorney's Docket : BIH-002AX

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TC Art Unit: 3731

I hereby certify that this correspondence is being sent via
facsimile to Examiner Gary Jackson, TC Art Unit 3731, Fax No.
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By: 

Thomas O. Hoover

Registration No. 32,470

Attorney for Applicant(s)

AMENDMENT

Via Facsimile
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated December 3, 2005,
please amend the above-identified patent application as follows.

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